BEST AVAILABLE COPY

	OLI	r STAPLE AREA	(for additional cross re	
	POSITION	INITIALS		ferences)
	FEE DETERMINATION	TALS	ID NO.	DATE
\$\frac{1}{2} \frac{1}{2} \frac	U.I.P.E. CLASSIEIED		- Marin	
	FURMALITY REVIEW		Will I	5/00
88 - 8	RESPONSE FORMALITY REVIEW	-XI	10823	0/00
A S			3 13	10/11/00
69	V	INDEX OF CL	-AIMS	
4	- (Through purpose)	Allowed	N	Non-elected
do	— (Through numeral) ÷	Canceled	Α	Interference
APPLIS Clain	Date	nestricted	0	Appeal Objected
O	Cia	im / Date		<u>. </u>
Final Original		Original	Claim	-I Date
APPLICANTS	J. I.		Final	
APP		31 3		
		3 + + + + + + -	100	
THE THE	55		103	
	56		104	+++++
	57		106	+++++
	59		108	+++++
111	60		109	
	62	++++	110	++
14 115	63		112	
	65	+++++	113	
	66		115	+++++
; <u>IN</u> <u>19</u> 11	1 68	+++++	117	++++
2d	69		118	+++++
122		+++	119	+++++
23	72 73		121	
	174	++	122	
(27)	75		124	+++++
[28]	76	++++	125	
	78 79		127	++++
31	80		128	
32	81	╘┋┋	130	++++
34	82		131	
35	84	++++	133	+++++
37	85		134	
38	87	++++	136	
	88		137	
41	90	+++++	139	
42	91		141	
44	1 93 1		1 142	
45	94	++++	143	++++
47	96	+++++	144	
48 49	97	++++	146	+++++
50	1 99	+++++	148	
7	hod	++++	149	
	If ma "		150	
If more than 150 claims or 10 actions staple additional sheet here				
	supple audition	nal sheet here		

staple additional sheet here

(LEFT INSIDE)